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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonapplications under 37C.F.R. §1.53(b))

Attorney Docket No.

PC23025A

First Inventor

Judith L. Treadway

Title

METHODS OF TREATING INFECTION USING ANTIBIOTICS
AND GLYCOGEN PHOSPHORYLASE INHIBITORS

Express Mail Label No.

EV 354211227 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:
 Mail Stop Patent Application
 Commissioner for Patents
 Box 1450
 Alexandria, VA 22313-1450

1. *Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status
See 37 CFR 1.27
3. Specification [Total Pages 26]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total sheets]
5. (unsigned) Oath or Declaration [Total 1] pages
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- 6.. Application Data Sheet. See 37 CFR 1.76
7. CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Copy (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies)
 - ii. Paper
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement
(when there is an assignee) Power of Attorney (unsigned)
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.

 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

18. CORRESPONDENCE ADDRESS
 Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below


28523

Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

NAME (Print/type)	Scott Alexander McNeil	Registration No. (Attorney/Agent)	37,185
Signature	<i>Scott Alexander McNeil</i>	Date	16 July 2003

 17575 U.S. PTO
 10/623032
 07/16/03

FEE TRANSMITTAL for FY 2003

Applicant claims small status. See 37 CFR 1.27

Total Amount of Payment (\$1086.00)

Complete if Known

Application Number	To Be Assigned
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Filing Date	Herewith
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First Named Inventor	Judith L. Treadway
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Examiner Name	To Be Assigned
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Art Unit	To Be Assigned
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Attorney Docket No.	PC23025A
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number **16-1445**

Deposit Account Name **Pfizer Inc.**

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity
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Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late fee or oath	<input type="checkbox"/>
1052	50	2052	25	Surcharge - late filing fee or cover sheet	<input type="checkbox"/>
1053	130	1053	130	Non-English specification	<input type="checkbox"/>
1812	2,520	1812	2,520	For filing a request for reexamination	<input type="checkbox"/>
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	<input type="checkbox"/>
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	<input type="checkbox"/>
1251	110	2251	55	Extension for reply within first month	<input type="checkbox"/>
1252	410	2252	205	Extension for reply within second month	<input type="checkbox"/>
1253	930	2253	465	Extension for reply within third month	<input type="checkbox"/>
1254	1,450	2254	725	Extension for reply within fourth month	<input type="checkbox"/>
1255	1,970	2255	985	Extension for reply within fifth month	<input type="checkbox"/>
1401	320	2401	160	Notice of Appeal	<input type="checkbox"/>
1402	320	2402	160	Filing a brief in support of an appeal	<input type="checkbox"/>
1403	280	2403	140	Request for oral hearing	<input type="checkbox"/>
1451	1,510	1451	1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
1452	110	2452	55	Petition to revive - unavoidable	<input type="checkbox"/>
1453	1,300	2453	650	Petition to revive - unintentional	<input type="checkbox"/>
1501	1,300	2501	650	Utility issue fee (or reissue)	<input type="checkbox"/>
1502	470	2502	235	Design issue fee	<input type="checkbox"/>
1503	630	2503	315	Plant issue fee	<input type="checkbox"/>
1460	130	1460	130	Petitions to the Commissioner	<input type="checkbox"/>
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	<input type="checkbox"/>
1801	750	2801	375	Request for Continued Examination (RCE)	<input type="checkbox"/>
1806	180	1806	180	Submission of Information Disclosure Statement	<input type="checkbox"/>
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	<input type="checkbox"/>
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="checkbox"/>
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	<input type="checkbox"/>
Other Fee (specify) _____					

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)	
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SUBMITTED BY

Name (Printed/Type)	Scott Alexander McNeil	Complete (if Applicable)
Signature	<i>Scott Alexander McNeil</i>	Reg. Number 37,185
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EXPRESS MAIL NO. EV354211227US